DECISION-MAKER:		HEALTH AND WELLBEING BOARD		
SUBJECT:		PHARMACEUTICAL NEEDS ASSESSMENT: CONSULTATION REPORT		
DATE OF DECISION:		17 th JANUARY 2018		
REPORT OF:		DIRECTOR OF PUBLIC HEALTH		
		CONTACT DETAILS		
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STATEMENT OF CONFIDENTIALITY

NOT APPLICABLE

BRIEF SUMMARY

The Health and Wellbeing Board has a statutory responsibility to publish a statement of the needs for pharmaceutical services of the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). It must be published every three years with the next PNA due to be published on 1st April 2018. A paper was brought to the Health and Wellbeing Board (HWB) on 18th October 2017 where the draft PNA was approved for consultation.

The regulations state that the HWB must undertake a consultation on the content of the PNA and it must run for minimum of 60 days. The consultation took place from 23rd October to 22nd December 2017. This paper presents preliminary findings from the consultation for discussion with HWB members. A full report on the consultation findings will be tabled at the HWB.

RECOMMENDATIONS:						
	(i) The Health and Wellbeing Board is asked to note the findings of					
	the consultation on the PNA.					
REASON	REASONS FOR REPORT RECOMMENDATIONS					
1.	The PNA is a report on the local needs for pharmaceutical services. It is used to identify gaps in current services or improvements that could be made to current or future service provision. The specific content of the PNA is set out in schedule 1 of the NHS (Pharmaceutical & Local Pharmaceutical Services) Regulations 2013. It is a statutory requirement for the Health and Wellbeing Board to publish a revised assessment within three years of its previous PNA. The refreshed Southampton PNA must be published on 1st April 2018.					
2.	There is a regulatory duty (NHS (Pharmaceutical & Local Pharmaceutical Services) Regulations 2013 No 349: Part 2: Reg 8) to have a 60 day consultation about the contents of the assessment it is making. As part of the Southampton PNA refresh, the consultation ran from Monday 23 rd October to Friday 22 nd December 2017.					

AI TERN	ATIVE OPTIONS CONSIDERED AND REJECTED			
3.	None			
DETAIL				
4.	 What is the requirement for consultation? According to the Regulations, the following must be consulted: Local Pharmaceutical Committee for its area Local Medical Committee in its area Any persons on the pharmaceutical lists and any dispensing doctors list for its area; Any local pharmaceutical service pharmacy in its area with whom the NHS England has made arrangements for the provision of any local pharmaceutical services; Local Healthwatch and any other patient, consumer or community group which in the opinion of the Health and Wellbeing Board has an interest in the provision of pharmaceutical services in its area Any NHS Trust or NHS Foundation Trust in the area NHS England Any neighbouring Health & Wellbeing Board 			
5.	Consultation questions The set of six questions used for the consultation of the Portsmouth PN 2015 was used (with minor amendments). For each question there was opportunity for respondents to add free text comments. Consultation with professional stakeholders All professional stakeholders as specified in the Regulations were contably email by Monday 23rd October 2017. All contractor pharmacies within city were contacted by a message on PharmOutcomes (software system used by pharmacies) and by email on 23rd October 2017. Consultation with the public The Southampton City Council insights and communications team share the consultation with residents using Southampton's City Council's digit communication channels. The surveys were hosted on the Southampton.			
	Council website on both the News and 'Have Your Say' consultation pages. The links to the pages were shared with over 13,000 subscribers to the council's Stay Connected email update service, with residents on social media including Facebook and Twitter and via partners in the health and voluntary sector. A hard copy of the PNA was available on request. NHS Southampton City Clinical Commissioning Group (CCG) publicised the consultation through distributing leaflets at a range of locations in the city and at various community events. The consultation was also discussed as part of the CCG Communications and Engagement reference group meeting on 22 nd November 2017. Healthwatch Southampton publicised the consultation via their website, in their newsletter (distributed to approx. 400 individuals), and using social media channels (Facebook and Twitter).			

6. Summary of consultation findings Response

The consultation received fifty-three responses; eight responses from professional stakeholders and 45 responses from members of the public.

Summary

Consultation findings showed satisfaction with the PNA. Comments will be addressed in the PNA but there will be no notable changes to the document before formal publication on 1st April 2018. A full report on the consultation findings will be tabled at the Health and Wellbeing Board. Overall responses to the consultation questions were as follows:

Has the purpose of the PNA been explained clearly?

75.0% (6/8) of professional stakeholders strongly agreed or agreed that the purpose of the PNA had been clearly explained (two chose not to respond).

93.3% (42/45) members of the public who responded strongly agreed, agreed or were neutral that the purpose of the PNA had been clearly explained (three chose not to respond).

Do you know of any relevant information that we have not included that may affect the conclusion of this document?

75.0% (6/8) of professional stakeholders did not know of any further relevant information that should have been included that would affect the document's conclusions (two chose not to respond).

75.6% (34/42) members of the public who responded did not know of any further relevant information that should have been included that would affect the document's conclusions (nine chose not to respond). Of the two respondents to the survey who stated there was further relevant information, only one additional comment was provided regarding the quality of service at a specific pharmacy.

From the information in the pharmaceutical needs assessment and my personal experience, I believe the pharmaceutical needs of myself (or my patients and/or the people I represent) are being met.

75.0% (6/8) of professional stakeholders strongly agreed, agreed or were neutral that the pharmaceutical needs of local residents were being met (two chose not to respond).

55.6% (25/45) members of the public who responded strongly agreed, agreed or were neutral that the pharmaceutical needs of local residents were being met (five (11.1%) disagreed and another 15 (33.3%) chose not to respond).

From the information in the pharmaceutical needs assessment and my personal experience, I believe that my future pharmaceutical needs for myself (or my patients and/or the people I represent) for the next four years are being met.

75.0% (6/8) of professional stakeholders strongly agreed, agreed or were neutral that the pharmaceutical needs of local residents are likely to be met over the next four years (two chose not to respond).

4.4% (2/45) members of the public who responded strongly agreed or agreed that the pharmaceutical needs of local residents are likely to be met over the next four years (43 chose not to respond).

Do you think there is a need for additional pharmacy sites within Southampton?

62.5% (6/8) of professional stakeholders strongly disagreed, disagreed or were neutral that there is a need for additional pharmacy sites in Southampton. One agreed there is a need (no reason given) and one chose not to respond.

53.3% (24/45) members of the public strongly disagreed, disagreed or were neutral that there is a need for additional pharmacy sites in Southampton (another 13 (28.9%) chose not to respond). Eight (17.8%) respondents to the public survey considered there to be a need for additional pharmacy sites. There were nineteen written comments from members of the public with nine indicating sufficient pharmacy sites and ten indicating a need for more. The reasons given are not considered to have a bearing on the conclusion of the PNA and will be presented in more depth at the Health and Wellbeing Board.

Do you have any further comments you would like to make about pharmaceutical services in Southampton? This can include good or bad experiences, any concerns, questions or just general comments you might have.

There were a small number of additional comments from professional stakeholders. Additional comments from members of the public could be broadly themed into issues relating to access and quality of service. The comments given are not considered to have a bearing on the conclusion of the PNA.

7. **Proposed timetable**

- 17th January: Present consultation findings to HWB for discussion
- Make final changes based on HWB feedback.
- 14th March: Present final document for approval
- 1st April 2018: Final PNA published.

RESOUCE IMPLICATIONS

Capital/Revenue

8 None

Property/Other

9 None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

There is a statutory duty requiring the Health and Wellbeing Board to undertake and publish this needs assessment under section 128A of the National Health Service Act 2006 and regulations made under that section,

	namely the National Health Service (Pharmaceutical & Local Pharmaceutical Services) Regulations 2013 ("the 2013 Regulations")					
10.2	Regulations 3 to 9 and Schedule 1 of the 2013 Regulations set out the					
	detailed requirements as to the content of needs assessments and the					
	manner in which the assessment is to be made and published.					
10.3	Regulation 8 of the 2013 Regulations, in particular, prescribes those					
	specified persons who must be consulted about the content of the					
	assessment and the manner in which they must be consulted about specified					
matters.						
Other Legal Implications:						
11 None						
RISK MANAGEMENT IMPLICATIONS						
12	None					
	RAMEWORK IMPLICATIONS					
13	None					
KEY DEC						
WARDS/C						
Appendic	SUPPORTING DOCU	MENTATION				
1.	None					
	its In Members' Rooms					
1.	None					
	mpact Assessment					
	plications/subject of the report require a	n Equality and	No			
	Safety Impact Assessment (ESIA) to be carried out.					
Privacy Impact Assessment						
Pilvacy II	<u> </u>	out.				
	npact Assessment		No			
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